FEC FORM 1

## STATEMENT OF ORGANIZATION

FORM 1	ORGANIA	ZATION	
	(See instruc	ctions)	Office use only
NAME OF COMMITTEE (in	full) (Check if name is changed)	Example: If typying, type over the lines	12FE4M5
DUNCAN FOR	CONGRESS		
ADDRESS (number and	street) PO BOX 2646		
(Check if add is changed)	ress KNOXVILLE		TN 37901 -
		CITY	STATE▲ ZIP CODE ▲
COMMITTEE'S E-MAIL ADDRESS    becky@sertoma.com			
5001,600.101			<del></del>
COMMITTEE'S WEB PAGE ADDRESS (URL)			
COMMITTEE'S FAX	NUMBER		
با لبنا			
2. DATE <b>M 0</b> .	$\begin{bmatrix} 0 & 0 & 0 \\ 0 & 0 \end{bmatrix} / \begin{bmatrix} 0 & 0 & 0 \\ 2 & 0 & 0 \end{bmatrix} $		
3. FEC IDENTIFICATION NUMBER C C00229104			
4. IS THIS STATEMENT X NEW (N) OR AMENDED (A)			
I certify that I have exam	nined this Statement and to the best of my	knowledge and belief it is true, correct	and complete
Type or Print Name of	Treasurer Dean Rice		
Signature of Treasure	r Electronically Filed by <b>Dean R</b>	ice	Date 01 / 30 / YYYYY
NOTE: Submission of fa		may subject the person signing this SI	atement to the penalties of 2 U.S.C. S437g.
Office Use Only		For further information Federal Election Communication Foll Free 800-424-9530 Local 202-694-1100	ssion FEC FORM 1

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